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NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: _____

Total Fee Calculation

Fee Code	Total Amount	Number Fee(s)	%	Fee	Fee	Total
Std. F						
Initial Filing Fee	<u>30.00</u>	<u>30</u>	<u>10</u>	<u>3</u>	<u>10.00</u>	<u>690.00</u>
First Claim: > 10	<u>20.00</u>	<u>30</u>	<u>10</u>	<u>3</u>	<u>10.00</u>	<u>180.00</u>
Independent Claim: > 10	<u>20.00</u>	<u>10</u>	<u>3</u>	<u>3.00</u>	<u>10.00</u>	<u>230.00</u>
Multiple-Claim Reduction	<u>20.00</u>	<u>10</u>	<u>3</u>	<u>3.00</u>	<u>10.00</u>	<u>260.00</u>
Search Fee	<u>20.00</u>	<u>10</u>	<u>3</u>	<u>3.00</u>	<u>10.00</u>	<u>130.00</u>
English Translation	<u>10.00</u>	<u>10</u>	<u>3</u>	<u>3.00</u>	<u>10.00</u>	<u>—</u>
<u>TOTAL FEE CALCULATION</u>						<u>1,494.00</u>

Fees due upon filing the application:

Total Filing Fees Due = 1,494.00

Less Filing Fees Submitted = 1

BALANCE DUE = 1,494.00

B. Alexander
Office of Initial Patent Examination

Figure 7

PATENT APPLICATION FEE DETERMINATION RECORD
Effective December 29, 1999

Application or Docket Number

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	30 minus 20= *	10
INDEPENDENT CLAIMS	6 minus 3 = *	3
MULTIPLE DEPENDENT CLAIM PRESENT	4	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY
TYPE

OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
	345.00	OR	690.00
X\$ 9=		OR	X\$18= 180.00
X39=		OR	X78= 234.00
+130=		OR	+260= 260.00
TOTAL		OR	TOTAL 1,344.00

SMALL ENTITY OR **OTHER THAN**
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=
X39=		OR	X78=
+130=		OR	+260=
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=
X39=		OR	X78=
+130=		OR	+260=
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE

(Column 1) (Column 2) (Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	**
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=
X39=		OR	X78=
+130=		OR	+260=
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.